Washington, D.C. 20549

FORM D

PROCESSED

DEC S O SOMP

I MUMSON FINANCIAL NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND / OR
UNIFORM LIMITED OFFERING EXEMPTION

Estimated average burden hours per response. . 16.00



Name of Offering (check if this is an amendment and name has changed, and indicate change.)						
Limited Liability Company Interests						
Filing Under (Check box(es) that apply):						
☐ ULOE						
Type of Filing: New Filing Amen	121 -71 - 1710-1					
A. BASIC ID	DENTIFICATION DATA					
1. Enter the information requested about the issuer	2000 E					
Name of Issuer (check if this is an amendment and nam Threadneedle Global Crescendo I	the has changed, and indicate change.)					
· · · · · · · · · · · · · · · · · · ·	d Street, City, State, Zip Code) Telephone Numbers (Including Area					
Corporation Trust Center, 1209 Orange Street, Wilmingt	on, Delaware 19801 USA Code) +345 909 8066					
Address of Principal Business Operations (Number an (if different from Executive Offices)	d Street, City, State, Zip Code) Telephone Numbers (Including Area Code)					
(if different from Exceditive Offices)	(300)					
Brief Description of Business Private Investor	nent Fund					
·						
Type of Business Organization	already formed Other (please specify): Limited Liability					
	Company					
□ business trust □ limited partnership, to						
Aut) as Estimated Data of Issues and as Constitution	Month Year 10 2004 ⊠ Actual ☐ Estimated					
Actual or Estimated Date of Incorporated or Organization 10 2004 Actual						
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:						
CN for Canada; FN for other foreign jurisdiction) DE						

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter						
Full Name (Last Name first, if individual) Threadneedle Asset Management Limited							
Business or Residence Address (Number and Street, City, State, Zip Code) 60 St Mary Axe, London EC3A 8JQ United Kingdom							
Check Box(es) that Apply:	Promoter						
Full Name	(Last Name first, if individual) Threadneedle Global Crescendo Management Limited (Manager of the Issuer)						
Business or Residence Address	(Number and Street, City, State, Zip Code) Ugland House, South Church Street, George Town, Grand Cayman, Cayman Islands, BWI						
Check Box(es) that Apply:	Promoter						
Full Name	(Last Name first, if individual) Austin, Michael						
Business or Residence Address	(Number and Street, City, State, Zip Code) Ugland House, South Church Street, George Town, Grand Cayman, Cayman Islands, BWI						
Check Box(es) that Apply:	Promoter						
Full Name	(Last Name first, if individual) Gresser, Lorin						
Business or Residence Address	(Number and Street, City, State, Zip Code) 60 St Mary Axe, London EC3A 8JQ United Kingdom						
Check Box(es) that Apply:	Promoter						
Full Name	(Last Name first, if individual) Litton, David						
Business or Residence Address	(Number and Street, City, State, Zip Code) 15 St George's Street, Douglas, Isle of Man IM1 1AJ						
Check Box(es) that Apply:	Promoter						
Full Name	(Last Name first, if individual) Shubotham, David						
Business or Residence Address	(Number and Street, City, State, Zip Code) 12 Merrion Square, Dublin 2, Ireland						
Check Box(es) that Apply:	Promoter						
Full Name	(Last Name first, if individual) Taylor, Michael						
Business or Residence Address	(Number and Street, City, State, Zip Code) 60 St Mary Axe, London EC3A 8JQ						

Check Box(es) that Apply:	☐ Promoter ☑ Beneficial Owner ☐ Executive O	incer				
	General and/or Managing Partner					
Full Name	(Last Name first, if individual)					
	H. Jay Sarles					
Business or Residence Addre	(Number and Street, City, State, Zip Code)					
	60 Edmunds Road, Wellesley, MA 02481, USA	60 Edmunds Road, Wellesley, MA 02481, USA				
	(Use blank sheet, or copy and use additional copies of this sheet, as ne	cessary)				

	1. Ha	s the issuer							occredited ing under U		this offeri	ing?	Ye [No ⊠	
	2. What is the minimum investment that will be accepted from any individual?								\$ 250,000 (Subject to the manager's discretion to reduce the minimum to \$100,000)							
													Ye	_	No	
	4. En ind wir bro	ter the offe ter the info directly, an th sales of so oker or dea aler. If mo u may set f	ormation re y commiss securities in ler register re than five	queston on the ed wi	ed for e or simil offering th the S persons	each par rerg. If a EC ar to be	erson v nunera n person nd/or w listed	who has be tion for so n to be liste vith a state are associa	en or will licitation of the deciration of the d	be paid or of purchas ociated pe ist the nam	given, dire ers in cont rson or age the of the bro	ectly or nection ent of a oker or	····	y		
	Full Na	ame	-				(La	st name first,	if individual)		-				_	
	Busine	ss or Resid	ence Addre	ess			(Nu	imber and Str	eet, City, Stat	te, Zip Code)						_
	Name	of Associat	ed Broker	or De	aler											_
		in Which P												4 11 Oc. 4		
	(Check	"All State	s" or check	indi	vidual S	States)		• • • • • • • • • • • • • • • • • • • •			•••••	🗀 2	All State	:S	
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	Full Name (Last name first, if individual)															
	Busine	ess or Resid	lence Addr	ess			(N	umber and St	reet, City, Sta	te, Zip Code	}			·		-
	Name	of Associa	ted Broker	or De	aler		_									-
		in Which P	•									74-4				
	(Check	c "All State	es" or check	(indi	viduai s	States)		•••••		[] All S	states				
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	Full Name (Last name first, if individual)															
	Business or Residence Address (Number and Street, City, State, Zip Code)															
	Name	Name of Associated Broker or Dealer														
		in Which F										States				_
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1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box \(\square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount
	Type of Security	Offering Price	Already Sold
	Debt	\$ <u>0</u>	\$ <u>0</u>
	* Equity	S <u>0</u>	\$ <u>0</u>
	Common Preferred		
	Convertible Securities (including warrants)	\$ <u>0</u>	\$ 0
	Partnership Interests		\$ 0
	Other (Specify: Limited Liability Company Interests)		\$ 250,000
	Total		\$ 250,000
	Answer also in Appendix, Column 3, if filing under ULOE.		
	* This Form D reports offers and sales in the US only.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	1	\$250, 000
	Non-accredited Investors	0	\$ 0
	Total (for filings under Rule 504 only)	N/A	N/A
	Answer also in Appendix, Column 4, if filing under ULOE		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Type of offering	,	
	Rule 505		\$
	Regulation A		\$
	Rule 504	-	\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		<u>s-</u>
	Printing and Engraving Costs		≥ _\$5,000
	Legal Fees		\$10,000
	Accounting Fees		≥ \$10,000
	Engineering Fees		_ \$ -
	Sales Commissions (specify finders' fees separately)		<u> </u>
	Other Expenses (identify) Blue Sky Filing Fees		∑ <u>\$5,000</u>

	C. OFFERING PRICE, NUMBER	R OF INVESTORS, EXPENS	SES AND USE OF	PROCEEDS		
	b. Enter the difference between the a response to Part C - Question 1 ar response to Part C - Question 4.a. This proceeds to the issuer."	difference is the "adjusted gross	<u>\$99,</u>	<u>999,970,000</u>		
5.	Indicate below the amount of the adjusused or proposed to be used for each amount for any purpose is not known, f box to the left of the estimate. The to equal the adjusted gross proceeds to the Part C - Question 4.b above.	of the purposes shown. If the urnish an estimate and check the stal of the payments listed must				
			Payments to Officers, Directors & Affiliates	Payments to Others		
	Salaries and fees		□ \$	\$		
	Purchase of real estate		\$	□ \$ <u> </u>		
	Purchase, rental or leasing and insta	allation of machinery and	□ \$ <u> </u>	□ s		
	Construction or leasing of plant bui	ldings and facilities	\$	□ \$		
	Acquisition of other business (incluinvolved in this offering that may be assets or securities of another issues	e used in exchange for the	□ s	□ s		
	Repayment of indebtedness		□ \$	s		
	Working capital		□ s	□ \$ <u> </u>		
	Other (specify): Investing in the Thi Master Fund Limited		⊠ \$ <u>99,999,970,000</u>	□ \$ <u> </u>		
	Column Totals		⊠ \$ <u>99,999,970,000</u>	□ \$ <u> </u>		
	Total Payments Listed (column total	ıls added)				
			⊠ \$ <u>99,999,970,000</u>			
	D	FEDERAL SIGNATURE				
ind Exc	issuer has duly caused this notice to be er Rule 505, the following signature co- hange Commission, upon written reques stor pursuant to paragraph (b)(2) of Rule	nstitutes an undertaking by the isset of its staff, the information furn	suer to furnish to the	U.S. Securities and		
ssu	er (Print or Type)	Signature	Date			
Chr CL•	eadneedle Global Crescendo Fund	VIII	22 Nov	Em <i>be</i> ic 2006		
Van	ne of Signer (Print or Type)	Title of Signer (Print or Type)	<u> </u>	<u> </u>		
DA	IID SHUBOTHAM	DIRECTOR OF MANAGER (OF THE ISSUER			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)